



1520 E 5<sup>th</sup> Street, Cheyenne, Wyoming 82002-0110

**MATTHEW H. MEAD**  
*Governor*  
**EDMUND J. SCHMIDT**  
*Director*  
**GREG COOK**  
*Administrator*  
**Phone** (307) 777-7231  
**Fax:** (307) 777-6255  
**Website:** <http://revenue.state.wy.us>

Dear Liquor Licensee:

We are pleased to offer you a great new way to pay for your liquor purchases. We now offer and encourage you to participate in our direct pay - ACH debit program. There are several advantages this payment method offers you.

First, you save time and money. You no longer spend time writing the check, putting it in an envelope and placing the proper amount of postage on it. That reduces your expenses for checks, envelopes and postage! It's a great deal.

Second, you no longer have to worry about getting your check to us on time. It's automatic every time you place an order with us. No more phone calls from us asking where your check is. No more worries about losing your ability to place orders by telephone or fax because your payment is late.

Third, it's simple and easy. By filling out the simple one page form we have enclosed, you authorize the Liquor Division to debit and/or credit your bank account for the exact amount of your invoice. No sooner than 24 hours after you place your order with us, we will debit your account for the exact amount you purchased. If you are due a credit, we will credit your account for the proper amount as well.

Please take advantage of this great way to pay for your liquor orders by completing the enclosed form and returning it to our office. The sooner the form is returned, the sooner you can start saving time and money. If you have any questions about our ACH debit program, please call Arlis Bauer at (307) 777-6189.

Sincerely,

A handwritten signature in cursive script that reads "Arlis Bauer".

Arlis Bauer

**AUTHORITY TO MAKE DIRECT PAYMENTS (ACH DEBITS)**  
**STATE OF WYOMING**  
**DEPARTMENT OF REVENUE**  
**LIQUOR DIVISION**

I (we) hereby authorize Wyoming Department of Revenue Liquor Division, hereafter called WLD, to initiate debit and/or credit entries to my (our) ☐ checking **OR** ☐ savings (select one) indicated below and the depository named below, hereafter called Depository, to debit and/or credit the same to such account.

Depository (Bank) Name: \_\_\_\_\_  
*(Financial institution where you have your account)*

Branch Name *(if applicable)*: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_

Routing Number: \_\_\_\_\_  
*(Obtain from your financial institution, # appears on bottom of your check)*

Account Number: \_\_\_\_\_

This authorization is to remain in full force and effect until WLD and Depository has received written notification from the liquor licensee of its termination in such time and in such manner as to afford WLD and Depository a reasonable opportunity to act on it.

Licensee Name: \_\_\_\_\_  
Customer Number: \_\_\_\_\_  
DBA: \_\_\_\_\_  
Location Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Date: \_\_\_\_\_

**ATTACH CANCELLED OR VOIDED SAMPLE OF CHECK**

**Please FAX to (307) 777-6255**